



King County

Mental Health, Chemical Abuse and Dependency Services Division

Department of
Community and Human Services

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King County Mental Health Advisory Board (MHAB) Regular Meeting May 13, 2014

Members Present: Lauren Davis, Maria Davis, Nancy Dow, Alicia Glenwell, John Holecek, Kristin Houser, Toni Krupski, Katelyn Morgaine, Eleanor Owen, Allen Panitch, Heather Spielvogel

Members Absent: Veronica Kavanagh

Guests Present: Joan Clement, King County Alcoholism and Substance Abuse Administration Board (KCASAAB) Liaison; Jim Vollendroff, Division Director, Mental Health, Chemical Abuse and Dependency Services Division; Mark Putnam, Director, Committee to End Homelessness; Declan Wynne, Director, Building Changes; Chami Arachchi, SAGE Clinical Supervisor, DESC.

Mental Health, Chemical Abuse and Dependency Services Division (MHCADSD)
Staff Present: Jim Vollendroff, Heather Whitten

I. Welcome and Introductions

Toni Krupski, Chair, convened the meeting at 4:35 p.m., in the Chinook Building, 401 5th Avenue, Seattle, Conference Room 126. Members were welcomed and introductions were made by each member. A quorum was present for the meeting.

II. Minutes Approval

The April 8th meeting minutes were unanimously approved.

III. Homeless Housing Initiatives – Mark Putnam, Declan Wynne

Toni introduced Mark and Declan and explained the reasons for the Board's review of the topic of homelessness and the issues surrounding it.

Mark Putnam, Director, Committee to End Homelessness: Mark previously worked at Building Changes and is now the director of the Committee, with a focus on Seattle's Ten Year Plan to End Homelessness.

Committee To End Homelessness Review: The committee is a collective of partners gathered together to resolve the homeless situation in Seattle. This gathering of interested parties focuses on homelessness in a way that allows for a more pronounced outreach with a greater coordination of resources.

Mark's Clarification Points:

- How is the Seattle's Ten Year Plan to End Homelessness going now that it's in its "home stretch" ninth year?
- Can we end homelessness?

The Ten Year Plan Review: Every city that set a ten year goal has yet to achieve it. Since housing goes hand in hand with health care and recovery, which is made clear by a mountain of data, it is critical that this goal be met. The plan has so far ended homelessness for 34,000 people. Last year the committee served 9,500 homeless households in the County, with 50 percent being newly homeless. Many factors contribute to homelessness and controlling them is not always possible.

Ending Homelessness: According to the definition, "ending homelessness" will be achieved when homelessness is a rare, short, or one-time occurrence.

- Rare: Means that fewer households experience homelessness per year.
- Short: Refers to how quickly homeless households move through the system to return to housing. Currently, the average duration of homelessness is 140 days; HUD's goal is set at 20 days for a return to housing.
- One-Time Occurrence: Homelessness is measured as a one-time occurrence if the individual or family remains in housing for two years or more after a housing placement. At present 15 percent of households served return to homelessness within the two year period; the goal is for five percent or less.

Mark believes that knowledge of the factors that work to end homelessness will provide long-term solutions.

Declan Wynne, Director, Building Changes: One of the committee partners is Building Changes whose director Declan Wynne was at the meeting to provide an outlook from the partner perspective. Declan was previously the clinical director of Sound Mental Health which is dedicated to housing, through creation and placement.

Partner Viewpoint: Most housing providers and agencies are doing their best with limited resources, increasing system restrictions, and client constraints. Building Changes is an intermediary company providing funding to providers within King County to develop permanent housing solutions. Solutions must come from all levels throughout the County to cover this "hard task."

Board Concerns:

- Housing options for level 3 sex offenders and undocumented immigrant families might include working with a landlord through a rental assistance program. However, long-term affordable housing units are the necessary solution to this problem.
- The target for expanding available units of supportive housing was set at 9,500 units of housing for the homeless nine years ago. The goal was set too low with revisions to the ten year plan coming up, new strategies need to be developed.
- With funding as the biggest obstacle, we need to be funding more programs that are working and looking seriously at those that aren't showing effective progress. Additional funding would address many problems, while present funding should be utilized more effectively. Permanent Supportive Housing and Rapid Rehousing are two examples of programs that are working well.
- While individuals in permanent supportive housing are counted as no longer homeless, they are a drain on available resources. A focus on client self-supportiveness would extend benefits and assist in client recovery.
- The 90 days redefinition of homelessness only means that clients are discharged back into homelessness after their treatment ends with a provider. Solutions need to be arranged before clients are discharged from the treatment facilities; use of peer counselors in this area might serve as a buffer.
- The Committee to End Homelessness is looking for additional advocacy with the State Legislature to increase the State Housing Trust Fund. Another issue of concern under legislative review relates to the cost and number of tenant screenings required for low-income renters to become housed.

IV. Nominations For Board Officers

Alicia Glenwell opened the nominations for board officers. This two year position is currently filled by Toni Krupski, who will step down in July. Nominations can be emailed or phoned in to Alicia or Bryan Baird during the month of May, with the vote scheduled for the June 10th meeting.

Alicia will send out an email to board members for suggestions.

- Current Nominees:
Chair - Kristin Houser
Vice Chair - Heather Spielvogel

V. Chairperson's Report

Toni deferred her report until next meeting due to time constraints.

Jim Vollendroff – Introduction to the Board

Toni introduced Jim and explained that since Jean is on vacation, Jim is filling in. Jim is the new division director for King County Mental Health, Chemical Abuse and Dependency Services, with over 30 years of chemical dependency experience.

Jim began by saying he was honored to be selected for the position, although he's already had several challenges.

Division Director's Challenges:

- There is budget deficit of over \$7.5 million for both mental health and substance abuse programs. The County has reserves to keep programs intact for a limited period of time.
- At present we are in a major transition to full integration between the mental health and substance abuse and primary care services. System transition will eventually assist the County with the budget deficit. This item is top priority; "We will move toward integration in everything we do".
- The Legislative mandate to increase Medicaid reimbursable services which means either more 16 bed facilities or a resolution to the Evaluation and Treatment (E & T) issue.
- Jim would also like to integrate the Mental Health and Substance Abuse Boards together; which would put "us ahead of the curve," and "show people what we're willing to do."
- He wants to be known as the transition leader, service provider, and boarding eliminator. He would like to create a "treatment on need" philosophy, with no client waiting for either mental health or substance abuse services.
- Jim believes there is money in the system available for use and that programs need to provide tangible outcomes.
- Make bigger goals, utilize better data, and take bolder actions. Jim has matrices outside his office that track the Division's priorities:
 - Boarding figures – trends should decrease
 - Crisis Solutions Center – increase referrals from law enforcement
 - Opening new methadone clinics in S. King County – keep up with the timeline that is in place
 - Increasing Detox Facilities – bring one or two new ones online
- What are the other "needs of the community" and how can we assist with them?
 - Housing for clients with mental illness
 - Youth with substance abuse issues – graduation levels are very low
 - Use just the right amount of hospitalization for clients and get them back out in the community to heal

Board's Concerns:

- Changing the focus from strictly Medicaid billable services to keeping youth and people with mental illness from re-entering the judicial system.

- Youth substance abuse – the definition of success has changed from how many kids graduated the programs, to how well the kids are doing in their lives.
- Wish List for Board Activity: Jim believes that the Boards have the ears of the legislators. Items and issues can be more easily orchestrated and reviewed with the Boards' assistance. Issue management through the Boards can be very time consuming but can be very effective.

VI. Committee Reports

Legislative Advocacy and Public Affairs Committee

Eleanor attended the Legislative Committee's new task force on integration; she did not see anyone from King County or the Board. Another meeting happens on June 13th at the Kent Criminal Justice Academy. The Legislative position is that they require the medical community on board.

New Bill: Tim Murphy, Republican, has a bill called Families in Mental Health Crisis Act moving through congress at present. The bill is intended to assist families with adults in mental health crisis to receive involuntary treatment service options.

Eleanor will make information on this bill available to the Board.

Lauren Davis' Trip to Washington, D.C.: Lauren to meet with the entire Democratic federal delegation, their legislative directors, and several lobbyists to review the E&T issue. The lobbyists mentioned that last July Jim McDermott co-sponsored bill HR 2757, now with 30 sponsors supporting it, which would remove the E&T exclusion from the 1965 Medicaid law. Lack of non-partisan backing has stalled this legislation in Congress.

Board Resolution: A delegation from the MHAB and from KCASAAB shall work together to raise non-partisan support for HR 2757 by apprising available legislators of the issues surrounding the E&T topic. The resolution was seconded and all members gave their unanimous approval.

Membership Committee

No movement in this area. Alicia will review with Bryan and Toni.

Quality Council (QC)

Kristin Houser – Dual participation on both the MHAB and QC has been challenging for some members. The QC provides an in-depth focus to the MHAB on certain topics such as outcomes and program effectiveness. The council's leadership, along with several top managers of MHCADSD, has reviewed the idea of suspending the council for a tentative six-month period, to enable the members to assist on a quality taskforce during the integration period of mental health and chemical dependency.

Board Approval: After members reviewed the topic, a tentative six-month suspension of the QC was approved.

Recovery Advisory Committee

No report.

VII. Staff Report - Jim Vollendroff

Toni introduced the Seattle Times article and requested Jim to review and update the Board on it.

http://seattletimes.com/html/localnews/2023580326_mentalhealthtechnicalityxml.html

Jim: The article was not a surprise. "We knew it was coming," and hopefully it will bring some attention to certain issues. Brian's story on the boarding issue several years ago brought in some much needed funding. The County is not always able to meet the statutory requirements for client contact when referred by hospital emergency departments due to many causes. Changing the requirements is also not a best suggestion to meet client's needs. The Seattle Times had not been given full information from MHCADSD due to an improper public request search. That situation has been reviewed and corrected. The article also misrepresented several items: it stated that MHCADSD had no solutions and no timeline for corrections in place, both of which are incorrect. The Designated Mental Health Professionals (DMHP) have been authorized to work overtime to cover the fluid situations and several vacant positions have been filled. Jim has numerous strategies available to manage the overwhelming demands and meet the statutory requirements which include expanding the mobile crisis team, supervisory coverage, and per diem staffing. Currently crisis situations must be responded to through a triage approach. A new article is expected in the Seattle Times in the near future.

VIII. Quarterly Liaison Reports

No report.

IX. Board and Community Concerns

Nancy Dow will be in a six-month DBT training and may not be available for continued board duties.

X. Adjournment:

With no further business, the meeting adjourned at 6:28 p.m.

Prepared by:
Heather Whitten, Clerical Support

Attested by:
Toni Krupski, Chair